

SATE BOARD ON	FORM	REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES CHECK APPROPRIATE BOXES—PLEASE TYPE OR PRINT IN BLACK INK Quarterly Report: (Check one:) 1 st 2 nd 3 rd 4 th Final Report (Fund balance on Line E must be \$0)			KINK	FOR OFFICE USE ONLY			
	D-2				┛╴┗┛° └	E TATE S	4 th STATE BOARD OF ELECTIO: S CHICAGO OFFICE		
CLINOIS		Amendment of the Report Indicated Above							
Full name and complete mailing address of Political Committee: CHECK FOR ADDRESS CHANGE							COMMITTEE ID #		
The Friends of Andres Tapia Campaign Committee									
							363€	15-04	
E-mail address:				СНЕС	K FOR E-MAIL ADD	RESS CHANGE			
REPORTING PERIOD CASH AVAILABLE AT BEGINNING					ALL POLITICAL COMMITTEES RETURN TO:				
7/1/2021 9/3	30/202 \$48				STATE BOARD OF ELECTIONS STATE BOARD 2329 S MacARTHUR BLVD OR 69 W WASHIN SPRINGFIELD, IL 62704-4503 CHICAGO, IL 6			ON ST, STE LL-08	
FROM THRU Repeat this amount in SECTION D, Line (A) SECTION A — RECEIPTS SECTION B -							- EXPENDITURES		
1. Individual Contributions					6. Transfers Out				
a. Itemized	(from Schedule		(1a		a. Itemized (fro	om Schedule B):	\$ <u>0</u>	(6a)	
b. Not-Iten	nized:	\$ <u>0</u>	(1b)	b. Not-Itemize	d:	\$ <u>2</u>	(6b)	
a. Itemized (from Schedule A): \$0 (2a)					7. Loans Made a Itemized (fro	om Schedule B).	_{\$} 0	(7a)	
b. Not-Item	\$0	\2b		a. Itemized (from Schedule B):b. Not-Itemized:		\$ \$0	(7a) (7b)		
3. Loans Received				· I	8. Expenditures				
	(from Schedule	·	(3a		a. Itemized (from Schedule B):		\$0	(8a)	
b. Not-Itemized \$0 (3b)					b. Not-Itemize		\$ <u>0</u>	(8b)	
4. Other Receipts a. Itemized (from Schedule A): \$0 (4a)					 Independent Expandent Expandent Expandent a. Itemized (from the image) 	penditures om Schedule B-9):	_{\$} 0	(9a)	
b. Not-Item		\$ <mark>0</mark>	 (4b	´	b. Not-Itemized		\$00	(9b)	
TOTAL RECE	IPTS (1a thru 4b)	<u>\$</u> 0	(TR)	TOTAL EXPEND	TURES (6a thru 91	o)\$	(TE)	
*******	******	**********	******	*	*************				
5. In-Kind Con	tributions	0				N C — DEBTS AN ude previously reporte	d unpaid debts)	<u>ONS</u>	
	(from Schedule I)	-	(5a)	- 1). a. Itemized (fro	·	\$ <u>0</u>	(10a)	
b. Not-Item		\$ <u>0</u> \$	(5b))	b. Not-Itemized		\$ <u>0</u>	(10b)	
TOTAL IN-KIND (5a + 5b) \$ (TI)					TOTAL DEBTS & C	DBLIGATIONS *************	\$ <u>0</u>		
						CTION D — CAS			
Name and address of person submitting this report <u>if other</u> than the committee's Chair or Treasurer:				•	Cash availat	ole at beginning of reporting period:	\$48	(A)	
						om Section A (TR)			
				-	Tota	al cash (A) plus (B)	: \$	(C)	
				- То	tal Expenditures fr	om Section B (TE)	\$ <u>2</u>	(D)	
					Funds av reporting pe	ailable at close of riod (C minus D) :	\$ 46	(E)	
		<u> </u>			Investments to	otal (if applicable)	\$	(F)	
VERIFICATION: I DECI STATEMENTS) HAS BE ARTICLE 9 OF THE ELE	LARE THAT THIS QUA EEN EXAMINED BY ME ECTION CODE. I UNDE	RTERLY REPORT OF CA E AND TO THE BEST TH RSTAND THAT WILLFU	AMPAIGN CON IE BEST OF MY ILLY FILING A FA	TRIBUTIO KNOWLED ALSE OR IN	NS AND EXPENDITURES GE AND BELIEF IS A TRU ICOMPLETE STATEMENT	(INCLUDING ACCOME E, CORRECT AND COM IS SUBJECT TO A CIVII	PANYING SCHEDU PLETE REPORT A PENALTY OF AT	JLES AND S REQUIRED BY LEAST \$1001 AND	
UP TO \$5000.		1///							
	/se	//w//	1/00	A			10/23/202	1	
SIGNATURE OF C	COMMITTEE TRE	ASURER OR CAND	IDATE	V -			D	ATE	

THIS FORM MAY BE REPRODUCED

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REVISED 08/2021

DATE